

that arm. Eastern colleagues of mine have called my attention to the fact that no matter what we do to the elbow, whether we put in membrane or fascia, or do a generous excision, the result is going to be fairly good. Not so the knee; not so the hip.

The Doctor's most interesting case, of course, is that neck case, because, as he has told it, that is not an acute affair. I have seen one such case with a partial dislocation, where the examining finger in the mouth and the X-ray proved the presence of characteristic deformity. This was an old Italian, who found relief from sub-occipital and post auricular pain.

I have seen two cases only which were the result of trauma. In one case, a child was running along on skates and fell with her companion and with her neck across the companion's foot. It snapped the neck and would have broken it, excepting the floor stopped the further progress of the head. The X-ray showed very clearly a true dislocation of one-half of the atlas upon the axis. I put the child up with constant extension and let her alone. I was afraid to attempt manipulative reduction. I knew the shock must have torn in part at least the check ligaments of the odontoid and that the respiratory center was just in front of the odontoid process. The next morning the dislocation had reduced itself under the influence of the permanent traction and the relaxation caused by sleep.

The other was a queer case. A man tumbled off a reaper backward and struck his head. This was at once displaced to one side and he suffered great pain radiating up over the head. I cut his shaving strop into two pieces and made a head sling to support the head. I then raised the head of the bed on stilts. He had great pain, radiating upward along the posterior articular and sub-occipital nerve. Relief from pain was immediate. He fell asleep as we were looking at him, and he had not slept for three days. He, too, reduced himself, so to speak, and he got well also.

The Doctor's patient presents the result of a slow process, and I think to attempt to correct it would probably kill the man by causing his odontoid process to destroy his respiratory center.

Again I wish to thank Dr. Campiche for presenting so interesting a group of cases.

BOOK REVIEWS

Bandaging. By A. D. Whiting, M. D., Instructor in Surgery at the University of Pennsylvania. 12 mo. of 151 pages, with 117 original illustrations. Philadelphia and London. W. B. Saunders Company, 1915. Cloth, \$1.25 net.

Any addition to the sadly neglected art of bandaging ought to be greeted with satisfaction by all of us, and Whiting's effort in this field deserves due credit. The author omits all the old Latin names, for which I do not blame him, and he has also discarded many of the classic bandages, and replaced them by more simple contrivances of his own. Experience will show whether these hold as well as the old ones.

We regret to find no reference to such works as Hoffa's *Verbandlehre*. One should not bother with such names as Thoracico-Scapular, Mento-Vertico-Occipital, and so forth, which the author uses for the handkerchief bandages. The figures are numerous and generally correct.

The book deals only with the roller bandages and with the handkerchief bandages, and for these can be recommended to students and nurses.

P. C.

The Starvation Treatment of Diabetes With a Series of Graduate Diets as Used at the Massachusetts General Hospital. By Lewis Webb Hill, M. D., and Rena S. Eckman, Dietitian. Introduction by Richard C. Cabot, M. D. Cloth. Price, \$1. Pp. 72. Boston: W. M. Leonard, 1915.

This little monograph contains a brief statement of the Allen treatment of diabetes as practiced at the Massachusetts General Hospital together with a carefully prepared list of graduated diets. The technic of the Allen treatment is not difficult to master according to this book. In fact it would seem very simple were it not that the real difficulty comes when the actual diet problems confront the physician who is not accustomed to figuring diets in percentages of certain definite foodstuffs.

To the practicing physician this little book should be of value provided he has followed the literature in regard to the Allen treatment. As a ready reference it can certainly be recommended to all physicians.

W. W. B.

Diseases of the Nervous System: A Text-Book of Neurology and Psychiatry. By Smith Ely Jelliffe, M. D., Ph. D., Adjunct Professor of Diseases of the Mind and Nervous System, New York Post-Graduate Medical School and Hospital, and William A. White, M. D., Superintendent of the Government Hospital for the Insane, Washington, D. C.; Professor of Nervous and Mental Diseases, Georgetown University; Professor of Mental Diseases, George Washington University, and Lecturer on Psychiatry, U. S. Army and U. S. Navy Medical Schools. Octavo, 796 pages, with 331 engravings and 11 plates. Cloth, \$6.00 net. Lea & Febiger, Publishers, Philadelphia and New York, 1915.

The contents of this book of 781 pages are divided into three major portions. Part I deals with the Physico-Chemical Systems (vegetative or visceral neurology), Part II, Sensori-Motor Systems, and Part III with Psychic or Symbolic Systems. The classification will thus be seen to be distinctive. Part I contains references to important advances in our knowledge of diseases of the sympathetic nervous system and of the glands of internal secretion. In general, it may be said of this work that the different phases of neurology and psychiatry have been brought up to date; the book is profusely illustrated by well chosen diagrams and photographs. Especial mention should be made in this regard of the numerous colored plates and accompanying translated descriptions taken from the late edition of "Semiologie des Affections du Systeme Nerveux," by J. Dejerine. A feature worthy of mention is the historical aspect of many of the diseases discussed.

It is to be expected that such a warm exponent of the Freudian hypothesis as is Jelliffe, would discuss the psychoneurosis, and such psychoses as dementia praecox and the paranoid states, from the standpoint of interpretation and treatment by psychoanalysis. This discussion, however, is not to the exclusion of the discussion of other theories and other treatments, and while the tendency to incline toward the Freudian views is evident, it is noted with pleasure that the treatment of the subject is conservative—much more so than we have noted in other recent works on this subject. In Chapter XVI an outline is given of the psychoanalytic theory. The concluding chapter discusses idiocy, feeble-mindedness and the defect groups, conditions toward which our attention has been directed of late because of their importance in relation to pedagogy and criminology.

W. F. S.